

**EXHIBIT 13**

State of Michigan Uniform Law Citation		Ticket No: <b>901815</b>		<input type="checkbox"/> Victim Involved	
US DOT#		Incident No: <b>2370-23</b>		Dept. No: <b>030</b>	
The People Of: <input type="checkbox"/> The State of Michigan <input type="checkbox"/> Township <input type="checkbox"/> City <input type="checkbox"/> Village <input checked="" type="checkbox"/> County		Local Use/Arrest No: <b>2370-23</b>		Detection Device	
OF <b>ST JOSEPH</b>		BAC		1 of 1	
THE UNDERSIGNED SAYS Month Day Year THAT ON <b>04/06/2023</b>		At Approximately <b>9:49 AM</b>		Date of Birth Month Day Year <b>07/03/1974</b>	
State <input checked="" type="checkbox"/> Oper/Chauff <input type="checkbox"/> CDL		Driver's License Number <b>J525469168526</b>			
Race <b>W</b>	Sex <b>M</b>	Hgt <b>6'3"</b>	Wgt <b>215</b>	Hair <b>BRO</b>	Eyes <b>BLU</b>
Occupation/Employer					
Name (First, Middle, Last) <b>KIRK EDWIN JENSEN</b>					
Street <b>5904 SNYDER RD</b>					
City <b>BERRIEN SPRINGS</b>		State <b>MI</b>		Zip <b>49103</b>	
E-mail Address		Cellular Phone			
Vehicle Plate No <b>DZQ9585</b>	Year <b>2023</b>	State <b>MI</b>	Vehicle Description (Year, Make, Color) <b>2003, FORD, WHI</b>		Veh. Type <b>PA</b>
THE PERSON NAMED ABOVE, in violation of <input type="checkbox"/> Local Ordinance <input checked="" type="checkbox"/> State Law <input type="checkbox"/> Administrative Rule					
UPON <b>§ 207</b>					
AT OR NEAR <b>HANNA RD</b>					
WITHIN <input type="checkbox"/> CITY <input type="checkbox"/> VILLAGE <input checked="" type="checkbox"/> TOWNSHIP <b>LOCKPORT</b>					
COUNTY OF <b>ST. JOSEPH CO</b> DID THE FOLLOWING:					
Type	MCL Compact Code Ordinance	Description (include any bond amount collected on each charge)	Charge No.		
<input type="checkbox"/> CI <input type="checkbox"/> Warn <input checked="" type="checkbox"/> Miss <input type="checkbox"/> Fug <input type="checkbox"/> Fel <input type="checkbox"/> Warn	<b>257.311</b>	<b>NO OPERATOR'S LICENSE IN POSSESSION</b>	1		
<input type="checkbox"/> CI <input type="checkbox"/> Warn <input checked="" type="checkbox"/> Miss <input type="checkbox"/> Fug <input type="checkbox"/> Fel <input type="checkbox"/> Warn	<b>257.301</b>	<b>DROVE WHILE UNLICENSED OR NOT VALID</b>	2		
<input checked="" type="checkbox"/> CI <input type="checkbox"/> Warn <input type="checkbox"/> Miss <input type="checkbox"/> Fug <input type="checkbox"/> Fel <input type="checkbox"/> Warn	<b>257.328(1)</b>	<b>NO PROOF OF INSURANCE</b>	3		

## OFFICER'S NOTES

STOPPED DUE TO R/O HAVING EXPIRED LICENSE. DRIVER FOUND TO HAVE A CANCELLED LICENSE. DRIVER DISPLAYED NO VALID STATE ISSUED IDENTIFICATION. PROOF OF INSURANCE GIVEN EXPIRED MARCH 14, 2023. GAVE PASSPORT NOT ISSUED BY U.S. GOVERNMENT AS IDENTIFICATION. CLAIMS ITS FROM "THE UNITED STATES OF AMERICA" AND IS DIFFERENT FROM UNITED STATES OF AMERICA. SOVEREIGN CITIZEN. CLAIMS HE'S NOT A U.S. CITIZEN BUT WAS BORN IN ILLINOIS.

WEATHER	ROADWAY		TRAFFIC	LIGHT
<input type="checkbox"/> Clear	<input checked="" type="checkbox"/> Dry	<input type="checkbox"/> Concrete	<input checked="" type="checkbox"/> Light	<input checked="" type="checkbox"/> Daylight
<input checked="" type="checkbox"/> Cloudy	<input type="checkbox"/> Wet	<input checked="" type="checkbox"/> Blacktop	<input type="checkbox"/> Medium	<input type="checkbox"/> Darkness
<input type="checkbox"/> Raining	<input type="checkbox"/> Muddy	<input type="checkbox"/> Gravel	<input type="checkbox"/> Heavy	<input type="checkbox"/> Dawn
<input type="checkbox"/> Snowing	<input type="checkbox"/> Snowy	<input type="checkbox"/> Unimproved	<input checked="" type="checkbox"/> Vehicle	<input type="checkbox"/> Dusk
<input type="checkbox"/> Fog	<input type="checkbox"/> Icy	<input type="checkbox"/> Divided	<input type="checkbox"/> Pedestrian	<input type="checkbox"/> Other
<input type="checkbox"/> Sleet	<input type="checkbox"/> Loose Material	<input type="checkbox"/> Other	<input type="checkbox"/> Cross Traffic	

## Remarks

STOPPED DUE TO R/O HAVING EXPIRED LICENSE. DRIVER FOUND TO HAVE A CANCELLED LICENSE. DRIVER DISPLAYED NO VALID STATE ISSUED IDENTIFICATION. PROOF OF INSURANCE GIVEN EXPIRED MARCH 14, 2023.

**DISPOSITION**

Judge/Magistrate \_\_\_\_\_

Court \_\_\_\_\_ Date \_\_\_\_\_

Location \_\_\_\_\_

Findings: ☐ Guilty/Responsible ☐ Not Guilty/Responsible ☐ Dismissed

Probation \_\_\_\_\_ Other \_\_\_\_\_

Remarks \_\_\_\_\_

POLICE/ENFORCEMENT AGENCY/PROSECUTOR COPY